



Atty. Dkt. No. 053466-0296

1 FW RCE
1644 \$
c.c.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Tadimitsu KISHIMOTO *et al.*
Title: CHRONIC RHEUMATOID ARTHRITIS THERAPY CONTAINING
IL-6 ANTAGONIST AS EFFECTIVE COMPONENT
Appl. No.: 09/756,125
Appl. Filing Date: 1/9/2001
Examiner: Gerald R. Ewoldt
Art Unit: 1644
Confirmation No.: 6506

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. **Submission required** under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

[] Please enter and consider the amendment and/or reply previously filed on ____.

09/05/2008 AWONDAF1 00000125 09756125

01 FC:1801
02 FC:1253

810.00 OP
1050.00 OP

- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on __ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply previously filed on __.
- ☐ Other __.
- b. Enclosed are:
- ☒ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of __ listed reference(s).
- ☐ Other .

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of __ months.

The filing fee is calculated below:

| | Claims as Amended | Previously Paid For | Extra Claims Present | Rate | Fee Totals |
|--|-------------------|---------------------|----------------------|------------|------------|
| RCE Fee 1.17(e): | | | | \$810.00 | = \$810.00 |
| Total Claims: | 3 | - 20 | = 0 | x \$50.00 | = \$0.00 |
| Independents | 2 | - 4 | = 0 | x \$210.00 | = \$0.00 |
| First presentation of any Multiple Dependent Claims: | | | | + \$370.00 | = \$0.00 |
| CLAIMS FEE TOTAL: | | | | | = \$810.00 |

☒ Applicants hereby petition for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

| | | | | |
|-------------------------------------|---|------------|---|------------|
| <input type="checkbox"/> | Extension for response filed within the first month: | \$120.00 | 0 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the second month: | \$460.00 | | \$0.00 |
| <input checked="" type="checkbox"/> | Extension for response filed within the third month: | \$1,050.00 | | \$1,050.00 |
| <input type="checkbox"/> | Extension for response filed within the fourth month: | \$1,640.00 | | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fifth month: | \$2,230.00 | | \$0.00 |
| | EXTENSION FEE SUBTOTAL: | | | \$1,050.00 |
| | EXTENSION FEE ALREADY PAID: - | | | \$0.00 |
| | EXTENSION FEE TOTAL | | | \$1,050.00 |
| | CLAIMS AND EXTENSION FEE TOTAL: | | | \$1,860.00 |
| <input type="checkbox"/> | Small Entity Fees Apply (subtract ½ of above): | | | \$0.00 |
| <input type="checkbox"/> | Suspension of action requested under 37 C.F.R. § 1.103(c) | | | \$0.00 |
| | TOTAL FEE: | | | \$1,860.00 |

A credit card payment form in the amount of \$1,860.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Sept. 4, 2008

FOLEY & LARDNER LLP

Customer Number: 22428

Telephone: (202) 672-5569

Facsimile: (202) 672-5399

By Stephen B. Maebius

Stephen B. Maebius

Attorney for Applicants

Registration No. 35,264